CLAIMS ONLY

Application Number	Filing Date
Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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Total Indep						
Total Depend						
Total Claims						

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
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Total Claims						

CLAIMS ONLY			Application Number	Filing Date
			Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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49							99						
50							100						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						